# H1N1 An Employer Perspective

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GE Consumer & Industrial
GE Enterprise Solutions



# **Discussion Topics**

- Assuring Employee Safety
- Assuring Business Continuity
- Managing the Message
- Managing Disruption
- Preparing for the Future

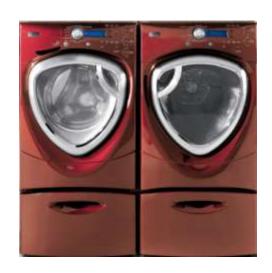
# Who We Are: Consumer & Industrial

Each of the three Consumer & Industrial businesses has a century or more of innovation, quality, style and performance. Today, GE Consumer & Industrial spans the globe as an industry leader in major appliances, lighting, and integrated industrial equipment, systems and services.

**Appliances** 

Lighting

**Industrial** 









# Who We Are: Enterprise Solutions

Sensing & Inspection Technologies



- Pressure
- Flow
- Temperature
- Gas & Moisture
- Validation
- MEMS

### Security



- Fire & Life Safety
- Video
   Surveillance
- Intrusion
- Access Control
- Detection –
   Explosives,
   Chemical,
   Narcotics, Bio

### GE Fanuc Intelligent Platforms



### **Embedded**

- Single Board
- Sensor & Signal Processing
- I/O Communications

### **Automation**

- Controllers
- Motion
- MES/HMI

# Digital Energy



- Protection Relays
- Meters & Auxiliary equipment Wireless Radios
- Multiplexers, Ethernet switches Current & Voltage Transformers
- Switches and Terminal Blocks
- Uninterruptible Power Supplies
  - Automatic Transfer Switches

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GE /



# Global Footprint...65k employees, 143 plants, sales in 150 countries



# Assuring Employee Safety

## Workers

- Am I safe?
- How are you keeping me safe?
- Where do I get 15,000 face masks?

# Travelers

- Can I get out?
- Can I get in?
- Can I go home?
- Can I go to work?

# First Responders

What about me boss?

## Medical Staff

- What is my role?
- How are you keeping me safe?

# Training

Gate Clearance



There is an outbreak of Swine influenza (Swine Flu) in Mexico City with clusters of cases in other towns in the US.

Swine Flu is a group of influenza viruses that regularly cause influenza in pigs. Usually infections in humans are uncommon. The symptoms include fever, tiredness, sore throat and coughing.

Human-to-human transmission of flu viruses can occur by "droplet" spread - when an infectious individual coughs, sneezes, talks or has hand-to-hand contact with an infected person (e.g. handshake). It can also spread if individuals touch surfaces that are contaminated with the flu virus and then touch their nose or mouth. Swine flu viruses cannot be transmitted by food. It is safe to eat pork and pork products that have been properly handled and/or sufficiently cooked.

Public health officials in the US are investigating whether the illness is more widespread, and how it may have arisen. They have advised residents of affected states to take everyday precautions to prevent illness, and urged them to contact their healthcare providers if they develop flu-like symptoms.

The virus does respond to the newer antiviral medications oseltamivir (Tamiflu) and zanamivir (Relenza). The seasonal influenza vaccination does not provide protection against the swine flu.

FAQs on this subject are enclosed.



# Stop the spread of germs that make you and others sick!





Clean Hands after coughing or sneezing.



or clean with alcohol-based hand cleaner.



### 阻止使您和他人患病的細菌傳播

# 雪您咳嗽或 打喷嚏時。 用纸巾遮掩口鼻; 或者 咳嗽或打喷嚏 到上衣袖中: 而非到手上。 將用過的紙巾 被入垃圾筒。 戴上口罩, 保護他人。 請用犯名 成水流手 咳嗽和打噴嚏後 或者 用以调精再 主要成分的 施手被选手 0.00









9 /

# To help ensure the safety of employees and visitors to this facility, carefully consider the two questions below.

 Currently or in the past 7 days, have you had, in addition to a significant fever, any of the following symptoms?

SORE THROAT BODY ACHES

COUGH CHILLS

HEADACHE UNUSUAL FATIGUE

STUFFY OR RUNNY NOSE

2. In the past 7 days, have you been in close contact with anyone who has the fiu?

### If either of these two conditions applies to you, you should:

- Exit the facility and do not return until symptoms resolve, or for 7 days – whichever is longer; and
- We recommend that you contact your healthcare provider.
- GE employees should also contact their manager to inform them of their absence.

### Respiratory etiquette is important to avoid getting the flu, or spreading it...

- Wash your hands frequently.
- Avoid touching your nose, mouth and eyes.
- If you need to cough or sneeze, cover your mouth and nose with a tissue. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.







# Clinic Procedures For Evaluating Employees

- Initial triage puts ill EE in a surgical mask and directs to a designated treatment room (NOT IN THE USUAL WAITING ROOM)
- The staff provider will use an N95 respirator
- The designated treatment room has the following features
- Minimal equipment in room and on the counter to make cleaning easier
- Equipment that cannot be moved is covered with paper sheets that can easily be discarded
- · All surfaces are cleaned following departure of patient and before reuse including the blood pressure cuff
- Medical staff have responsibility for room cleaning above daily housekeeping
- Staff will make a visible display to the patient of both hand washing and cleaning of stethoscope prior to donning gloves
- Following the treatment of the ill EE, hand washing again after removing gloves is required
- Inventories of needed supplies are being secured now to avoid shortages later in the Fall.....masks, thermometers, paper sheets, cleaning supplies, etc.

Employees who develop flu symptoms at work are directed to leave work without any need to come to the clinic. This should greatly reduce the number of EEs being seen in the clinics. A waiting area is identified for those employees who are awaiting rides. This waiting area should have the following features:

- Be a separate designated area or room
- Surgical masks are available in this area along with alcohol hand cleaner
- A room or area that can be easily cleaned (little furniture) which is located near the exit is best.
- Housekeeping would be notified for cleaning as needed for this room

Review procedures in each clinic now for the flu season and adjust inventories of supplies as needed. Don't get caught short! Be sure all clinic personnel are aware of the plan and procedures



# Dusk Masks a.k.a. "Filtering Face Pieces"

# **Available Through the Medical Clinic**

### Use Limitations

- This respirator does not supply oxygen. Do not use in atmospheres containing less than 19.5% oxygen.
- Do not use when concentrations of contaminants are immediately dangerous to life and health, are unknown or when concentrations exceed 10 times the permissible exposure limit (PEL) or according to specific OSHA standards or applicable government regulations, whichever is lower.
- 3. Do not alter, abuse or misuse this respirator.
- Do not use with beards or other facial hair or other conditions that prevent a good seal between the face and the sealing surface of the respirator.
- Respirators can help protect your lungs against certain airborne contaminants, however, they will not prevent entry through other routes such as the skin, which would require additional personal protective equipment (PPE).
- This respirator is designed for occupational/professional use by adults who are properly trained in their use and limitations. Respirators are not designed to be used by children.
- Individuals with a compromised respiratory system, such as asthma or emphysema, should consult a
  physician and complete a medical evaluation prior to use.

### Time Use Limitation

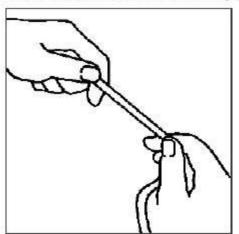
If respirator becomes damaged, soiled, or breathing becomes difficult, leave the contaminated area immediately and replace the respirator.



# Dusk Masks a.k.a. "Filtering Face Pieces"

### **Fitting Instructions**

Must be followed each time respirator is worn.



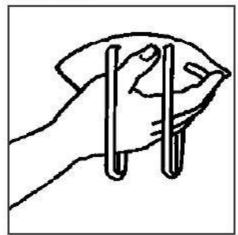




Fig. 1

Bitrex should be used for initial documented qualitative fit test

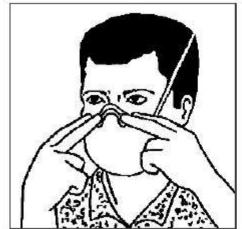




Fig. 4

Fig. 5

# **Assuring Business Continuity**

# Supply Chain

- What do you do when they shut down Mexico?
- Responding to customer safety ?

# Transportation

- Is the product contaminated?
- What about the driver?
- When is it safe to receive shipment?

# Supplies

- Recommended and sources?
- Where did you say I could get 15,000 face masks?
- Antiviral Rx?

# Workforce

- Guidance and training
- How many at home workers does your IT support?









Modiciate

· Nursing Homes

· Food Services

Sanitation

Social Services

· Aid Organizations

· Food Producers

Belense Begt,

Dermitories

Banking

• Comerate Workforce

### Poutry Workers

- First Besponders
- · Bisaster Relief
- · ISA
- · Police
- [2]
- · Government
- Emergency Services Telecommunications Law Enforcement
- Airlines
- · Home Realth
- Postal Workers Hospitality
- Community Services Dergy
- · Hospice
- · Day Care
- · Health Dept.

 Education · landers

• Corrections

Homeland Security

www.mcrsafety.com/innovations

· Iruckers

· Mass Transit

· Linen Services

Agriculture

- · National Coard
- Laboratory
- Belivery Personnel
  - · fustructors

http://www.who.int/car/disease/avian\_influence/es/

http://www.odc.nov/llu/usodemie/

In depth information about the Bird Ru and HEN1 http://cdc.gov/flu/avan/gen-infu/facts.htm

### Pandemic Preparedness Where You Live

http://gandemicfls.gov/wheeyspiline/index.html

MCR Safety offers a full line of disposable gloves, aprom, eye protection, disposable clothing and safety vests that may be considered as preparation for catastrophic events.

### What You Need and ... What You Need To Know.

#### Resources for the Business Community Prepare, Plan, Stay Informed

A pandemic is a global disease outbreak. A worldwide pandemic could have a major effect on the global economy, including travel, trade, tourism, food consumption and eventually, investment and financial markets. Planning for pandemics by business and industry is essential to minimize a pandemic's impact. Companies that provide critical infrastructure services, such as power and telecommunications, also have a special responsibility to plan for continued operation in a crisis and should plan accordingly. As with any catastrophe, having a contingency plan is essential. Absenteeism, change in patterns of commerce and interruption of service are just a few of the problems that will emerge. The following websites offer invaluable information on readiness, preparedness, reaction and more.

#### Updated Worldwide Press Releases

Regularly updated listing of various Pandemic related media releases. http://www.mcmalety.com/innovations/info/Pandenic\_Booklet.pdf

#### Preparing Workplaces for Pandemic

OSHA has published a full library of information, including organizational charts. http://odia.com/Publications/influence\_pandemic.html

#### Pandemic Influenza Preparedness, Response, and Recovery Guide

For critical infrastructure and key resources by U.S. Department of Horneland.

http://www.pordenicflu.pov/plan/pdl/CAPpandenicinfluenoiGode.pdf

### Planning and Response Checklists

The US Government has prepared numerous checklists and guides for schools. the workplace, homes and more.

http://www.pandemicffu.gov/plan/index.html

#### World Health Organization (WHO)

A wealth of world-wide related information, including up to date tracking of infections and bitalities.

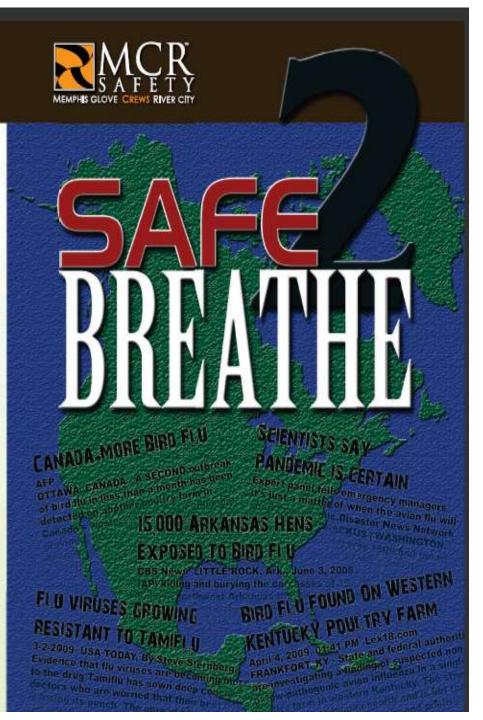
#### U.S. Center for Disease Control (CDC)

The CDC is the first line of information for the United States.

#### Key Facts about Avian Influence (Bird Flu) and Avian Influence A (H5M1) Virus

### Interactive map and links to your community.

#### Related PPE items for Pandemic Preparedness



### 800-955-6887

### GE Company Guidance

Use and Disposal of Surgical Masks for the Prevention of Respiratory Infections
November, 2005

The following guidelines have been prepared by GE Corporate Medical Services for the protection of employees from avian influenza, SARS, and other serious respiratory infections.

Most respiratory infections are spread in large or small respiratory droplets that are spread from an infected individual during breathing, speaking, coughing, or sneezing. These droplets may be inhaled by other individuals in close proximity, causing the spread of disease. Several devices may interrupt the spread of disease by either preventing the spread of infected droplets or serving as a barrier against inhalation. GE has developed guidelines for the use of two such products-paper surgical masks and N-95 particulate respirators.

### The use of surgical masks by symptomatic individuals

Surgical masks form a reasonably good barrier against the spread of respiratory droplets. No brand or style of mask offers distinct advantages. Masks must fit snugly to be fully effective. Care must be taken to remove and discard masks properly. Surgical masks used by ill individuals should be disposed daily.

### The use of surgical mask by non-infected individuals

Surgical masks have not been shown to be effective against the spread of avian influenza, SARS, tuberculosis or other serious infections among healthy people. Although masks may offer some protection against large droplets produced by coughs or sneezes, in general, inspired air travels around the sides of the mask.

### Proper handling and disposal of paper surgical masks

Surgical masks may actually spread infectious disease if not handled and disposed of properly. To minimize the chance of spreading infection on a mask, the following instructions should be followed:

- Masks used by ill in dividuals should be changed daily to prevent the accumulation of infectious material. Masks used by non-ill individuals may be worn until soiled or torn.
- When removed, masks should be handled carefully. They should not be placed with the inside surface against any object that may become contaminated. Used masks should not be carried on belt loops.
- Masks may be discarded with normal trash. Items should not be retrieved from trash bins containing masks.
- Thorough handwashing should be done after handling any used mask, including those you
  have worn.
- Trash containers in which used masks have been discarded should be cleaned regularly with a disinfectant or 2% bleach solution.

### N95 Respirator use

Particulate respirators, such as N-95's filter all inspired air. They are effective for preventing the inhalation of infectious particles. A drawback to the use of these filters is that they increase the work of breathing. As such, they may not be suitable for individuals with lung or heart disease. To insure proper and safe use of N-95 respirators, all users should receive basic training on how to wear these devices. Like surgical masks, respirators can spread disease. Between uses they should be stored in sealed bags. Strict hand washing should be performed every time a respirator is removed.



# Managing the Message

- CDC
- Flu.gov
- WHO
- Country Screening; Pregnancy
- Company Posters/Gate Clearance
- Local Health Authorities Quarantine
- Physician Practices Testing and Tamiflu
- From Reuters Health Information:
   Yet Another New Flu Virus Emerges in Canada
- From Reuters Health Information: Sinovac Says One-Shot Swine Flu Vaccine Effective



# Dealing with Country Requirements

Please note- Beijing Government, Beijing Municipal Health Bureau, Beijing Municipal commission of commerce & Beijing Public Health Emergency Command Office together issued the following three notices/rules, the main points as below:

- Request employees (esp. foreigner companies) back from AH1N1 epidemic areas stay at home self quarantine for 7days.
- Any site with more than 600 employees need assign one full-time public health staff. Less than 600 need to have a part time staff
- Need report immediately to local CDC if more than three employees with flu-like symptoms were found on site

Violation of mentioned responsibilities (detail see attached link) will lead to orders to suspend business, cease or revoke relevant certificate of approval or business license, and impose administrative fine between 50,000 and 200,000 RMB Yuan; where it constitutes a violation of public security regulations, it shall be punished by the Police Authority according to relevant laws.



### AUSTRALIA/NEW ZEALAND

7/28/09 - Australia

Australian officials July 28 confirmed more than 19,000 pandemic (H1N1) 2009 infections and 50 associated deaths - mostly in Victoria and New South Wales. Almost 400 people are currently hospitalized, with over 100 people in intensive care. Approximately 10 percent of the workforce in New South Wales is absent from work due to illness, 20 percent higher than last year during the same period of time.

Australian health officials report that pandemic (H1N1) 2009, rather than seasonal influenza viruses, has become the dominant influenza virus circulating in the community.

7/28/09 - New Zealand

On July 28 health authorities in New Zealand confirmed more than 2,700, and 13 related deaths. A total of 72 patients are currently being hospitalized, with 22 in intensive care. All elective surgery has been cancelled at Christchurch Hospital, where the intensive care unit has been overwhelmed with pandemic influenza patients.

Officials have emphasized personal preventative measures for pregnant women after six new mothers were reported seriously ill following premature births.

### CANADA

7/27/09 - Pandemic (H1N1) 2009 cases continue to spread throughout all 13 of Canada's provinces and territories. As of July 23, officials reported more than 10.500 cases and 55 deaths.

### CHINA

Mainland Chinese officials continue to take the temperature of all individuals arriving in the country. If anyone is ill, people closest to the sick passenger are quarantined for seven days, or until authorities determine that the sick passenger is not infected with H1N1. In contrast, passengers arriving in Taiwan or Hong Kong who have been in close contact with sick passengers are not quarantined. In all locations, people who are sick are isolated and referred for medical evaluation. (Please refer to iJET alert: "Screening and Quarantine for H1N1 - China, Hong Kong, Taiwan" for more details.)

Beijing City Government has requested all visitors to Beijing from countries affected by H1N1 flu virus to observe a seven-day self-quarantine upon arrival in Beijing.













# **PANDEMIC FLU**

### Find swine flu information

### Northern Ireland

Health information

www.dhsspsni.gov.uk

Public information
www.nidirect.gov.uk

Business information

www.nibusinessinfo.co.uk

### Wales → Cymraeg

Health information

www.nhsdirect.wales.nhs.uk

Public information
www.wales.gov.uk

Business information
> www.business-support-

www.business-supportwales.gov.uk



### 0800 1 513 513

### Scotland

Health information

www.nhs24.com

- 101

Public information

• www.scotland.gov.uk

**Business information** 

www.bgateway.com

### England

Health information

www.nhs.uk

**Public information** 

www.direct.gov.uk

**Business information** 

www.businesslink.gov.uk

### Get swine flu treatment and further advice

If you have flu-like symptoms and are concerned:

In England:

NATIONAL PANDEMIC FLU SERVICE

 Stay at home Click here for your symptoms to be assessed

You can also call one of the numbers below:

Tel: 0800 1 513 100

Textphone for people who are deaf or hard of hearing: 0800 1 513 200

### In Scotland:

- Stay at home
- Contact your GP or NHS 24

NHS 24: 08454 24 24 24

### In Wales:

- Stay at home
- Contact your GP
- Contact NHS Direct Wales for further advice

NHS Direct Wales: 0845 46 47

### In Northern Ireland:

- Stay at home
- Contact your GP if you are concerned
- For further advice, contact the Northern Ireland Swine Flu Helpline

Northern Ireland Swine Flu Helpline: 0800 0514 142 (Monday to Friday, 9am to 5pm)

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### ANNOUNCEMENTS & EVENTS

### Swine Flu Travel update

12 May 2009

Source: Corporate Citizenship

GE has received information that some airports across the world are imposing government-mandated quarantines on travelers who arrive exhibiting flu-like symptoms.

We are aware this has occurred in Beijing and Moscow, but other locations may have similar aggressive screening.

In these cases, there was no evidence that the traveler had the H1N1 swine flu infection. However, the mere presence of fever or flu-like symptoms has led to quarantine, which could last up to seven days. GE is not able to intervene on behalf of our travelers in these cases because the quarantines are government-mandated.

Given this information, please ensure that you are free from such symptoms at the time you start travel. If you are in doubt, please consult your healthcare provider or your business medical director to assess your fitness to travel.

Flu-like symptoms include fever, cough, sore throat, body aches, headache, chills and fatigue.

In addition, employees are advised to carry their yellow card for vaccinations if possible, as travelers are reporting that these cards are now being scrutinized. There is an increased chance that you may not be admitted to a country without up to date immunizations.

### Comments

No one has yet commented on this story.



Team,

Yesterday the World Health Organization (WHO) raised its alert level of the H1N1 virus to Phase 6, which means that there is evidence of sustained human-to-human transmission globally of the H1N1 virus.

This change does not signify that the virus is any more dangerous or that anyone's individual risk has increased; it just means that more countries are involved. The decision by the WHO was expected and does not change our efforts and policies to prevent the spread of the disease.

We are well positioned to keep employees safe

GE's crisis and medical teams continue to regularly review our policies and actions. Our current approach anticipated the global spread. We are in regular contact with the CDC and other global agencies.

Everyone's continued cooperation is needed to help halt the spread of the virus, and we are addressing this in GE by continuing to educate our employees about actions to take to protect themselves, and actions to take if they are sick or in close contact with someone who is ill.

We are communicating this through the **prominent display of the attached poster**. **Please work with your site crises** managers/team to ensure this poster is placed at building entrance areas and other highly visible employee and visitor areas.

We are not instituting additional "gate screening" of employees or visitors at the present time unless directed by country regulations or GE country NX.

Please feel free to contact me with any questions.

Peter Fass MD Medical Director C&I and Enterprise Solutions



# **Managing Disruption**

## Absence Policies

But I've used up all my sick time!!

# Pay Practices

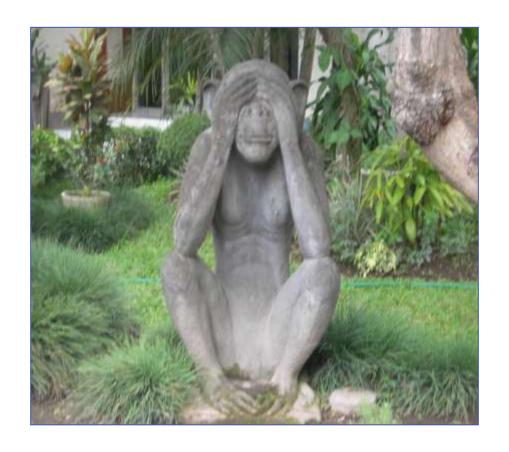
You made me stay home – what do you mean its unpaid?

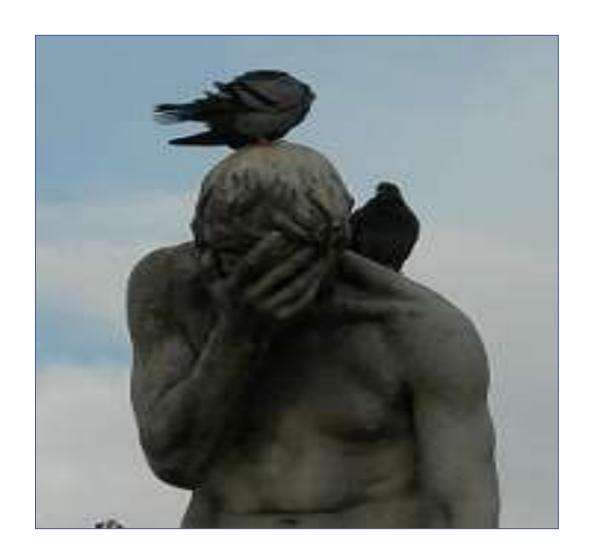
### Enforcement

Public Health and Communicable
 Disease



# Preparing for the Future







	Stages	1 to 4			
	Status	Task	Owner	Date of Completion	Comments
1	H	Pre-source hygiene supplies (disinfectant, masks, hand rub)			
2	Ц	Prepare site disinfection process of work area			
3	]	Review Corporate privacy policy with regard to front gate screening and contact tracing			
4	Ц	Prepare front gate exclusion process			
5	]	Prepare processes to reduce the frequency and duration of close contact among workers			
6	I	Prepare contact tracing process (GE will do contact training only if asked/required by public health)			
7	l l	Identify special risk employees			
8		Prepare process for management of infection exposure in the workplace			
9	W	Review BCP, including work from home and emergency evacuation plans			
10	H	Outline communications for Phase 5 response			



	Status	Task	Owner	Date of Completion	Comments
11	Γ	Sites should perform emergency preparedness drills			
12	Ш	Determine a primary public health contact			
13	Ц	Develop the capacity to isolate ill employees until removed from the workplace			
14	]	Contractor notification			
15	Ш	Develop and plan for scenarios that may impact demand on company products			
16	Ц	Determine the potential impact of a pandemic on company business financials			
17	Ц	Develop visitor exclusion policy			
18	Ц	Identify sources of contingency workers			
19	Ш	Identify mental health and EAP providers			
20	Ц	Develop HR guidelines for extended sick days			



	А	В	С	D	Е	F	G	Н	- 1	J	K
1	Pander	nic Influenza Action and Pi	eparation: CML Check	dist							
2	<b>GE</b> Resp	onse Level 1-4 Pre Pandemic: ∨iru	ıs with potential or established pe	rson-	to-pei	son t	ransı	nissid	on		
3		Prime Stakeholder	○ Secondary Stakeholder								
4	Application	Task	Support Materials	Corporate Medical	Org Comm	Corporate Crisis Leadership	Corporate HR	Business Medical Lead Regional Medical Lead	Business Leadership	National Executive	Site Crisis Leader
_	Location	Actions	Support materials							_	
6	Non-U.S.	Organize and oversee completion of checklist items across Businesses	N/A							•	
7	Global	Communicate situation and FAQ's to employees	Cover letter and FAQ sheets	•		•					
8	Global	Communication to senior leadership	Galvin letter	•		•					
9	Global	Educate and encourage handwashing and respiratory etiquette	Posters, tent cards, emails, muster meetings								•
10	Global	Exclude overtly ill individuals from the workplace	Posters, tent cards, emails, muster meetings								•
11	Global	Review Comprehensive Preparedness Plan and Checklists	CML Plan, Checklists	•		•					
12	Global	Promote seasonal fluvax for employees	N/A					•			
4  4	Continuous vigilence for phase changes and event of ISID alarts HAN CDC Clinician Registry  I I I GE Response Level 1-4 / GE Response Level 5 / GE Response Level 6 /										



	А	В	С	D	Е	F	G	Н	-	J	K	L	•
1	Pande	mic Influenza Action and	Preparation: CML Cl										
2	GE Response Level 5- Pandemic virus erRegional person-to-person outbreak												
	A Ii	<ul> <li>Prime stakeholder</li> <li>Supporting stakeholder</li> </ul>	S M i l.	Corporate Medical	Org Comm	Corporate Crisis Leadership	Corporate HR	Business Medical Lead Regional Medical Lead	Business Leadership	National Executive	Site Crisis Leader	Site EHS Manager	
3	Application	Task Actions	Support Materials		-						S	S	
5		Communicate situation and FAQ's to employees	Cover letter and FAQ sheets	٠	0	0							
6	Global	Communication to senior leadership	Galvin letter	•		0							
7		Begin front gate/front desk self assessment program	Self-assessment questionaire and instruction sheet								•		
8	Affected region	Begin contact tracing	Contact tracing worksheet, flow chart and instructions								•	0	
9	Affected region	Purchase masks and disinfectant	Previous sourcing guides								•	0	
10	Affected region	Disinfect potentially contaminated surfaces	Disinfection process guide									•	
11	Affected region	Consider relocation of expatriates and other critical managers	Country-specific evacuation plans						•	•			
12	Global	Restrict travel to affected regions	TAS system			•			0	•			
iá a	Global	Consider provision of Tamiflu for mission critical esponse Level 1-4 \( \) GE Response Level 5 \( \) GE	N/A Response Level 6 /	•				0					<b>,</b>



	А	В	С	D	Е	F	G	Н	- 1	
1	Panc	lemic Influenza Action an	d Preparation: CML	Checklist						
2	GE Resp	onse Level 6-Pandemic								
					Corporate Medical	Org Comm	Corporate Crisis Leadership	Corporate HR	Business Medical Lead Regional Medical Lead	Business Leadership
3	Application	Task	Support Materials	Location	ర	0.	ပိ	ပိ	Bu	<u> </u>
4		Actions								
5	Global	Communicate situation and FAQ's to employees	Cover letter and FAQ sheets	Inside GE	•	0	•			
6	Global	Communication to senior leadership	Galvin letter	Galvin archive	•		•			
7	Global	Continuous vigilence for disease spread			•					
8	Global	Regional surveillance and progress reports	Daily updates and alerts	TBD	•					
9	Regional	Cancel all non-essential face to face meetings	TBD	TBD						•
10	Global	Dynamic decision making			•	•	•	•	•	٠
11		A) Work from home strategy								
12		B) Travel								
i e	▶ ▶  \ GE Re	C) Isolation esponse Level 1-4 / GE Response Level 5 / GE Res	sponse Level 6							<b>+</b>



# To help ensure the safety of employees and visitors to this facility, carefully consider this question below.

Currently or in the past 7 days, have you had:

SIGNIFICANT FEVER AND ... any of the following symptoms?

COUGH STUFFY OR RUNNY NOSE SORE THROAT CHILLS
BODY ACHES
HEADACHE
UNUSUAL FATIGUE

### If the answer is YES, you should:

- Exit the facility and do not return until you have been symptom-free for 24 hours, whichever is longer, and
- We recommend that you contact your healthcare provider.
- GE employees should contact their manager promptly to discuss their absence.

# Respiratory etiquette is important to avoid getting the flu, or spreading it...

- Wash your hands frequently.
- Avoid touching your nose, mouth and eyes.
- If you need to cough or sneeze, cover your mouth and nose with a tissue. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.



### Colleagues,

Summer is coming to an end, and that means the first days of school are right around the corner. As kids head back to school this year, many parents will be thinking of how to help keep their children healthy as we head into the traditional fall and winter flu season, with the added concern of the H1N1 flu virus.

The Centers for Disease Control and Prevention (CDC) recommends 4 main ways you and your family may keep from getting sick with the flu at school appearance by washing your hands often with soap and water, especially after coughing or sneezing. Alcohol-based hand cleaners are also effective. Teach children how to properly wash their hands and practice at home.

- •Cover your mouth and nose with a tissue when you cough or sneeze. If you don't have a tissue, cough or sneeze into your elbow or shoulder; not into your hands.
- •Stay home if you or your child is sick for at least 24 hours after there is no longer a fever or signs of a fever (without the use of fever-reducing medicine). Keeping sick students at home means that they keep their viruses to themselves rather than sharing them with others.
- •Get your family vaccinated for seasonal flu and 2009 H1N1 flu when vaccines are available.

### If flu conditions become MORE severe, parents should consider the following steps:

- •Extend the time sick children stay home for at least 7 days, even if they feel better sooner. People who are still sick after 7 days should continue to stay home until at least 24 hours after symptoms have completely gone away.
- •If a household member is sick, keep any school-aged brothers or sisters home for 5 days from the time the household member became sick. Parents should monitor their health and the health of other school-aged children for fever and other symptoms of the flu.

### Follow these steps to prepare for the flu during the 2009-2010 school year:

- •Plan for child care at home if your child gets sick or their school is dismissed. Remember to allocate vacation, sick and personal times judiciously and in conjunction with a spouse or other caregiver to make sure you are able to maximize any potential care-giving time.
- •Plan to monitor the health of the sick child and any other children in the household by checking for fever and other symptoms of flu.
- •Identify if you have children who are at higher risk of serious disease from the flu and talk to your healthcare provider about a plan to protect them during the flu season. Children at high risk of serious disease from the flu include: children under 5 years of age and those children with chronic medical conditions, such as asthma and diabetes.
- •Identify a separate room in the house for the care of sick family members.
- Update emergency contact lists.
- •Collect games, books, DVDs and other items to keep your family entertained if schools are dismissed or your child is sick and must stay home.

Children with chronic health problems such as asthma, diabetes, heart disease, metabolic conditions, neurologic and neuromuscular disorders, or who are pregnant are at higher risk of having complications from flu. In addition, all children younger than 5 years old are at higher risk of flu complications compared to older children. Read guidelines and tips for keeping children at higher risk of flu healthy this season <u>here</u>.

### More information

For more information, please see the following resources:

Key facts about the flu: http://www.cdc.gov/flu/keyfacts.htm

One Stop Access to U.S. Government Pandemic Flu Information <a href="http://www.pandemicflu.gov">http://www.pandemicflu.gov</a>

Information on Influenza Symptoms, Treatment, Vaccinations <a href="http://www.cdc.gov/flu/">http://www.cdc.gov/flu/</a>



# **Patient Care Checklist**

New influenza A (H1N1) June 2009

Replaces: 15 May 2009 Expires: December 2009.

UPON ARRIVAL TO CLINICAL SETTING/TRIAGE  Direct patient with flu-like symptoms to designated waiting area Provide instruction and materials to patient on respiratory hygiene/cough etiquette Put medical/surgical mask on patient if available and tolerable to patient
UPON INITIAL ASSESSMENT
Record respiratory rate over one full minute and oxygen saturation if possible  If respiratory rate is high or oxygen saturation is below 90% alert senior care staff for action#  Record history, including flu-like symptoms, date of orset, travel, contact with people who have flu-like symptoms, co-morbidities  Consider specialized diagnostic tests (e.g. RT-PCR)  Use medical/surgical mask, eye protection, gloves when taking respiratory samples  Label specimen correctly and send as per local regulations with biohazard precautions  Consider alternative or additional diagnoses  Report suspected case to local authority
INITIAL AND ONGOING PATIENT MANAGEMENT
Supportive therapy for new influenza A (H1N1) patient as for any influenza patient induding:  Give oxygen to maintain oxygen saturation above 90% or if respiratory rate is elevated (when oxygen saturation monitor not available)  Give paracetamol/acetaminophen if considering an antipyretic for patients less than 18 years old  Give appropriate antibiotic if evidence of secondary bacterial infection (e.g. pneumonia)  Consider alternative or additional diagnoses  Decide on need for antivirals* (oseltamivir or zanamivir), considering contra-indications and drug interactions

This checklist is intended for use by hospital staff treating anyone with a medically suspected or confirmed case of new influenza A (H1N1) per local definition. This checklist highlights areas of care critical for the management of new influenza A (H1N1).

It is not intended to replace routine care.

#### BEFORE PATIENT TRANSPORT/TRANSFER

 Put medical/surgical mask on patient if available and tolerable to patient

### BEFORE EVERY PATIENT CONTACT

- □ Put on medical/surgical mask
   □ Clean hands
- Put on eye protection, gown and gloves if there is risk of exposure to body fluids/splashes
- Clean and disinfect personal/dedicated patient equipment between patients
- Change gloves (if applicable) and clean hands between patients

### IF USING AEROSOL-GENERATING PROCEDURES ALSO (e.g. intubation, bronchoscopy, CPR, suction)

- Allow entry of essential staff only
- ☐ Put on gown
- Put on particulate respirator
- (e.g. EU FFP2, US NIOSH-certified N95) if available
- Put on eye protection, and then put on gloves
- Perform planned procedure in an adequately ventilated room

# BEFORE PATIENT ENTRY TO DESIGNATED AREA (isolation room or cohort)

- Post restricted entry and infection control signs
   Provide dedicated patient equipment if available
- Ensure at least 1 metre (3.3 feet) between patients in cohort area
- Ensure local protocol for frequent linen and surface deaning in place

This checklist is not intended to be comprehensive.

Additions and modifications to fit local practice are encouraged.

### BEFORE ENTERING DESIGNATED AREA (isolation room or cohort)

- Put on medical/surgical mask
- Clean hands

The above applies to visitors also

# BEFORE LEAVING DESIGNATED AREA (isolation room or cohort)

- Remove any personal protective equipment (gloves, gown, mask, eye protection)
- Dispose of disposable items as per local protocol
- Clean hands
- Clean and disinfect dedicated patient equipment and personal equipment that has been in contact with patient
- Dispose of viral-contaminated waste as dinical waste

The above applies to visitors also

#### BEFORE DISCHARGE OF CONFIRMED OR SUSPECTED CASE

- Provide instruction and materials to patient/caregiver on respiratory hydiene/couch etiquette
- Provide advice on home isolation, infection control and limiting social contact
- Record patient address and telephone number

#### AFTER DISCHARGE

- Dispose of or clean and disinfect dedicated patient equipment as per local protocol
- Change and launder linen without shaking
- Clean surfaces as per local protocol
- ☐ Dispose of viral-contaminated waste as dinical waste

<sup>\*#</sup>See instructions on the back side for additional information and references.

Equipment on this checklist is recommended if available.





# **Appendix**



# Corporate Medical Services Site Influenza Tabletop Exercise

Exercise 1.0

### Agenda

:00-:10 Introduction

:10-:15 Instructions

:15-:30 Stage | Scenario and planning

:30-:45 Stage I Report-in and feedback

:45-1:00 Stage II Scenario and planning

1:00-1:15 Stage II Report-in and feedback

1:15-1:30 Stage III Scenario and planning

1:30-2:00 Stage III Report-in and feedback

2:00-2:30 Review and corrective action plan

### Instructions-

The following exercise has been designed to simulate the emergence of a pandemic flu strain of human infection in the area of a (company) site. The drill is divided into three stages, which sequentially advance the scenario. At the beginning of each stage, the facilitator will read the scenario. The team will then have 15 minutes to brainstorm and record their response. The design of this drill requires participants to compress their planning. Few minutes will be allowed to draft decisions that, in real time, might be made in hours or even days. This time pressure will favor those managers that have pre-considered issues related to the emergence of a pandemic virus in their region.



After completion of this drill, the site pandemic response team should have achieved the following objectives:

- Create the ideal organizational structure and personnel for managing the outbreak of a serious respiratory illness in the workplace.
- ✓ Identify the critical decisions that may be faced by site managers
- Create an integrated response process that includes site managers, Business leadership and (where applicable) the National Executive office.
- ✓ Deploy tools that have been developed for prevention and management of infections in the workplace

After each planning period, the team will furnish a formal action plan to the facilitator. The facilitator will detail an "ideal" plan generated by the Crisis Management team. The group may proceed to the next stage by either building on their action plan, or that suggested by the crises team.

After completion of Stage III, the group should assess their performance. The team is strongly advised to self-critique their performance and identify gaps. Prior to adjournment, the team should create an action plan, including timetable and review process, for resolving any questions or deficiencies.

**Ground Rules and Tips-**Treat these situations as real events. Participate openly. Ask questions and share your thoughts. Please keep the objectives in mind throughout the tabletop. Time will not allow for discussion of related or peripheral issues. Observers are encouraged to attend the drill. They may not be able to actively participate due to time constraints. Site managers should also consider inviting community emergency responders to either participate in or observe the exercise.



**Pandemic Influenza**: **Scenario Introduction**- influenza may become a threat to both the health of employees and the continuity of business processes. The following exercise has been created to determine the level of site readiness for a local outbreak. Prior to completing this exercise, participants should become familiar with any company documents and tools related to Flu Outbreak. The following departments should be represented at this drill:

Ш	Plant or office Manager
	Site EHS Manager
	Site Physician or Nurse
	Site HR manager
	Facility Maintenance Manager
	Site Communications Manager
	Site Security Lead

The exercise is organized in stage. At each stage, pause to discuss the necessary site activities and plans.

### Scenario: January 6

A mutation has enabled the influenza virus to readily pass from birds to humans and from person-to-person. Outbreaks have been reported in several countries in the Far East and Eastern Europe. Sporadic cases have occurred on all continents except for South America and Australia. To date, public health containment efforts (in developed countries) have been reasonably successful in identifying and isolating cases. Global anxiety levels range from moderate (people are closely following the news) to very high (wearing masks in public, avoiding poultry, pigs, and eggs). Some travel restrictions have been imposed by both governments (airport screening) and Company to cities where community transmission has occurred. Although the travel restrictions have impacted company marketing and sales efforts, supply chains are mostly intact and operations are near capacity. Until recently, there were no signs of influenza in or near your community. Site operations have continued without major interruption, although the restriction on travel to outbreak regions and a general reluctance to accept visitors from those areas has stressed the facility. There have been no unexplained absences and no unusual illnesses among employees or dependents.



Within the past week influenza has been diagnosed in 13 individuals in a city 20 km (12 miles) from your facility. None of those infected have had documented contact with infected birds. Three of the patients were family members who had returned from a trip to an area with a reported influenza cluster 16 days ago. The local public health authority has responded to the outbreak by issuing the following directives:

- 1. Anyone having been in close contact with a patient within the last 10 days has been advised to call a public health hotline number and remain in their homes for the next 10 days.
- 2. Individuals with flu symptoms must report by phone to the local health department immediately. A public health nurse will visit the home and obtain a blood sample for testing. Individuals who may be infected with pandemic flu will either receive home care or be transferred to County General Hospital for treatment and isolation. Family members and other close contacts may be subject to a mandatory 10 day home quarantine.
- 3. All community meetings have been cancelled. Schools are closed throughout the county.
- 4. Tamiflu is being provided to household and casual contacts of the ill residents. The drug is not available in pharmacies.

### The local situation is as follows:

- Most shops and restaurants have remained open, although business has dramatically decreased. Supermarkets and pharmacies are being stressed by individuals seeking to accumulate basic supplies. Municipal services, such as police, fire and sanitation remain intact. Supplies of food, water and gasoline are adequate.
- 2. There has been a limited exodus from the county, although most residents believe that there are no nearby "safe harbors".
- 3. Anxiety among local residents is moderately high. Although people are spending as much time as possible in the home, the general feeling is that the outbreak is limited and can be contained. This opinion is being reinforced by local and state government officials.



**Stage 1-**At the present time there are no reports of unusual illness among site employees. Several, however, live in the city where the outbreak has occurred. A few have been provided Tamiflu. And advised to take a tablet daily for the next 7 days. One had been in close contact with a case and is under voluntary quarantine. For the moment, the facility is functioning near capacity. Although the absentee rate is slightly above baseline, most employees are reporting for work. Materials are arriving on schedule. Orders are being processed, filled and shipped. Employees are concerned about the possibility of infection. There have been inquiries to plant management about what Company is doing to protect them and their families.

### Questions

- What action steps are needed to minimize
  - The risk of infection in the workplace
  - 2. The risk of Business disruption

**Stage 2: Monday, January 8, 9:30 a.m.** The plant manager and site nurse are informed that an assembly employee appears ill. She is flushed, weak, and seems somewhat breathless. She claims that she is "OK, it's just a bad cold". On further questioning, she claims to feel feverish, has a headache, and tells the nurse "all my muscles hurt". At the moment the employee is seated at her workstation. The line has been stopped. Coworkers appear visibly concerned.

### Questions

What	immed	liate	actions	are	need	led	?

- Where should the employee be taken?
- Who should escort the employee?
- What is the role of the site nurse and clinic?
- Who needs to be notified?
- □ What record needs to be created? By whom?



**Stage 3-11:00 a.m.** The ill employee is informed that she must leave the work area at once. She is not allowed to gather her belongings from the locker area. Her supervisor provides her with a surgical mask. The employee is too ill to drive to the designated hospital. A decision is made that a coworker may not drive her. Her husband is called and is en route. The estimated time of arrival is 45 minutes. Because of inclement weather the employee may not wait out-of-doors. The supervisor escorts her to the designated isolation room, leaves and closes the door. One hour later her husband arrives. The employee and husband leave for the hospital by car.

No one in the community health department is available to immediately assist. A call back from the town Health Director is expected. The Business Medical Lead has been called; a return call is pending as well.

Employees in the plant are quite concerned, but not panicked. All have the same questions:

- Was I in close enough contact (at my workstation, in the cafeteria, in the break room) to have been exposed?
- Is it safe for me to go home? Will I expose my kids?
- Will I be guarantined? If I go home, will my family be guarantined?
- Should I shower right away? Should I change my clothes?
- Are there other workers around me who may also be contagious?
- How can I get screened for exposure to the virus?
- Should I take Tamiflu? Where do I get it?
- Will the facility be closed? Will I be laid off?
- What is Company doing to help me?



A van from a local television station has just arrived in the visitor's parking lot. The front gate security team is requesting guidance.

At the moment, most production operations have stopped. A few employees have left, but most are clustered in small groups within the facility discussing the unfolding events.

### Questions

- What actions are immediately necessary to minimize risk to other employees?
- What specific information should be immediately gathered for later use?
- □ Can employees in the work area stay on site? Should they be allowed to leave?
- Can operations be resumed?
- What message needs to be communicated to site employees? Can their questions be answered? By whom?
- What support or actions are necessary for the supervisor who escorted the illemployee to the isolation room?

